

APPLICATION FOR UNITED STATES PATENT
Declaration for Patent Application

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: 1 **Modular Structure F r Heart Beat Signal Wireless Transmitter**

the specification of which

2 (file no. _____)

(check at least one)

3 ☒ is attached hereto

4 ☐ was filed on _____ as (5) U.S. Application Serial No. _____

6 ☐ and was amended on _____
(if applicable)

Use this portion only if you are entering the U.S. National phase based on a PCT International Application designating the U.S.	7 <input type="checkbox"/>	was filed as PCT international application
	8	Number _____
	9	on _____
	10	and was amended under PCT Article(s) 19 and/or 34 on _____ (if applicable).

I hereby declare that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended, by any amendment referred to above.

I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me which is material to patentability in accordance with Title 37, Code of Federal Regulations, ' 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, ' 119 or 365 of any foreign application(s) for patent or inventor=s certificate listed below and have also identified below any foreign application(s) for patent or inventor=s certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date earlier than that of the application(s) on which priority is claimed.

Prior (Foreign) Application(s) any Priority Claims Under 35 U.S.C. 119 or 365

Priority Claimed

11a

(Country) _____	(Number) _____	(Day/Month/Year Filed) _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(Country) _____	(Number) _____	(Day/Month/Year Filed) _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(Country) _____	(Number) _____	(Day/Month/Year Filed) _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No

☐ Additional foreign application numbers are listed on a supplemental priority data sheet attached hereto.

Priority Claim(s) from U.S. Provisional Application(s) - I hereby claim the benefit under Title 35, United States Code, ' 119(e) of any United States provisional application(s) listed below:

11b

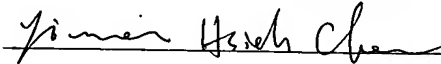
Application No. _____	Day/Month/Year Filed _____	Application No. _____	Day/Month/Year Filed _____
<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet attached hereto.			

Do not use this portion to identify a PCT application if the parent application is the U.S. National phase of the PCT application	I hereby claim the benefit under Title 35, United States Code, 120 of any United States application(s) or under Title 35, United States Code, 365 of any PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code ' 112, I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, ' 1.56 which became available between filing date of the prior application and the national or PCT international filing date of this application.		
	12	(U.S. Parent Application or PCT Parent Number) _____	(Parent Filing Date) _____ Status (patented, pending, abandoned) _____
	<input type="checkbox"/> Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet attached hereto.		

I hereby appoint the following attorneys of the firm of Stevens, Davis, Miller & Mosher, L.L.P. as my attorneys of record with full power of substitution and revocation to prosecute this application and to transact all business in the Patent and Trademark Office: James E. Ledbetter, Reg. No. 28732; Thomas P. Pavelko, Reg. No. 31689; and Anthony P. Venturino, Reg. No. 31674.

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO STEVENS, DAVIS, MILLER & MOSHER, L.L.P., 1615 L Street, N.W., Suite 850, Washington, D.C. 20036, TELEPHONE (202) 408-5100, FACSIMILE (202) 408-5200.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful statements may jeopardize the validity of the application or any patent issuing thereon.

13a	Typewritten Full Name of Sole or Second Inventor		<u>Yi Mei</u>	<u>HSIEH CHEN</u>
			Given Name	Middle Name Family Name
14a	Inventor=s Signature	Λ	<u></u>	
15a	Date of Signature	Λ	<u>Octo</u>	<u>Twenty-eighth</u> <u>2003</u>
			Month	Day Year
16a	Residence		<u>N0. 88-1, Kwang Fu Rd. Sec. 1 San Chung, Taipei, Taiwan</u>	
			City	State or Province Country
17a	Citizenship		<u>Taiwan R.O.C.</u>	
18a	Post Office Address (Insert complete mailing address, including country)		<u>Same as residence</u>	
13b	Typewritten Full Name of Sole or Second Inventor			
			Given Name	Middle Name Family Name
14b	Inventor=s Signature	Λ		
15b	Date of Signature	Λ		
			Month	Day Year
16b	Residence			
			City	State or Province Country
17b	Citizenship			
18b	Post Office Address (Insert complete mailing address, including country)			
13c	Typewritten Full Name of Sole or Third Inventor			
			Given Name	Middle Name Family Name
14c	Inventor=s Signature	Λ		
15c	Date of Signature	Λ		
			Month	Day Year
16c	Residence			
			City	State or Province Country
17c	Citizenship			
18c	Post Office Address (Insert complete mailing address, including country)			

*Note to Inventor: Please sign name on line 14 exactly as it appears in line 13 and insert the actual date of signing on line 15. If there are more than four inventors, please add a copy of this page for identification and signatures for the additional inventors.